



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

October 3, 2024

Sherri Turner
Adult Learning Systems-Lower Michigan
Suite F
8170 Jackson Road
Ann Arbor, MI 48103

RE: Application #: AS500418611
Vinecrest
50072 Vinecrest Lane
Chesterfield, MI 48047

Dear Ms. Turner:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 6 is issued.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available, and you need to speak to someone immediately, please contact the local office at (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "L. Reed".

LaShonda Reed, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste 9-100
Detroit, MI 48202
(586) 676-2877

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AS500418611
Applicant Name:	Adult Learning Systems-Lower Michigan
Applicant Address:	Suite F 8170 Jackson Road Ann Arbor, MI 48103
Applicant Telephone #:	(734) 408-0112
Administrator/Licensee Designee:	Tracie Shier/Sherri Turner
Name of Facility:	Vinecrest
Facility Address:	50072 Vinecrest Lane Chesterfield, MI 48047
Facility Telephone #:	(734) 408-0112
Application Date:	06/20/2024
Capacity:	6
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. METHODOLOGY

06/20/2024	Enrollment
06/20/2024	PSOR on Address Completed
06/20/2024	Contact - Document Received 1326
06/25/2024	Application Incomplete Letter Sent
06/26/2024	Application Complete/On-site Needed
08/02/2024	Inspection Completed On-site
08/02/2024	Inspection Completed-BCAL Sub. Compliance
09/25/2024	Inspection Completed-BCAL Full Compliance
09/26/2024	SC-Application Received - Original
09/26/2024	Recommend license issuance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

The small adult foster care home is located in a residential area in Chesterfield, Michigan. The home is a two-story colonial brick and vinyl home with a full basement and detached 2.5 space garage. The first floor of the home consists of a living room, dining room, kitchen, one full bathroom, two bedrooms and laundry room. The second floor consists of two bedrooms and two full bathrooms.

The furnace and hot water heater are located in the basement with a 1¾-inch solid core door equipped with an automatic self-closing device and positive latching hardware located at top/bottom of stairs. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	12 X 10.3	123	1
2	12.4 X 10.5	128.47	1
3	17.8 X 15.6	273.83	2
4	12.3 X 23.7	288.90	2

Total capacity: 6

The living room, dining room, and kitchen areas measure a total of 532.92 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Based on the above information, it is concluded that this facility can accommodate **six (6)** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection and personal care to **six (6)** male ambulatory adults whose diagnosis is mentally impaired, in the least restrictive environment possible.

This is a residential group home for males with mental illness who require a structured setting. The program focuses on the recovery and improvement of functioning for the individuals served. The program is designed to maintain adequate funding that will ensure community resources for the adult population with mental illness and to maintain optimal health for the residents. The program provides further education to assist residents with making adult choices and addressing co-occurring disorders. Hours/Days of Services: This is a 24-hour, 365-day-a-year program with an emergency backup system. The persons served are adults who have a chronic mental illness and no longer require inpatient psychiatric care but need the structure of a group home setting. The services provide 24-hour staff assistance in personal hygiene, self-care, medication management, medical care, social skills, recreational and vocational activities, transportation, advocacy and support, and reintegration into the community. The program provides community resources/referral services in area resources but are not limited to, churches, libraries, potential employment sites, and educational and recreational facilities. Referral services are provided through the local funding agency or other pre-paid health plans within the geographic region.

A personal behavior support plan will be designed and implemented for each resident's social and behavioral developmental needs. Residents will be referred from: (Gateway, Consumer Link, and Synergy Partners).

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the responsible agency.

The licensee will provide all transportation for program and medical needs. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools and libraries, local museums, shopping centers, and local parks.

C. Applicant and Administrator Qualifications

The applicant is Adult Learning Systems Lower Michigan, which is a Non-Profit Corporation that was established in Michigan, on 0528/1981. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The Board of Directors of Adult Learning Systems Lower Michigan has submitted documentation appointing Sherri Turner as licensee designee for this facility and Tracie Shier as the administrator of the facility.

Sherri Turner is the licensee designee for multiple adult foster care homes throughout southeast Michigan. Ms. Turner has provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Ms. Turner submitted her resume, which details obtaining a bachelor's degree in health administration. Sherri Turner has been employed with Adult Learning Systems (ALS) since February 1995. Sherri Turner's current position is Executive Director. In this position, she is responsible for 250 plus employees. She previously held the following positions with ALS: Program Director, Residential Manager Direct Care Worker, Executive/Accounting Assistance, and Administrative Assistant. In addition to Sherri Turner's current and past employment with ALS, she has held the following positions: US Army Reserves-Chief Instructor/ Course Manager (Master Sergeant), Senior Instructor/Human Resources Specialist, and Flight Operations Supervisor. Sherri Turner has certifications in National Professional Human Resources, CPR/First Aid, Commission of Rehabilitation Surveyor, and Certified Army Instructor. Sherri Turner has several awards, honors, and involved activities.

Tracie Shier has been employed with Adult Learning Systems LM since 8/20/2002. Sherri Turner has provided residential services in various settings throughout our agency. As a direct care worker and home supervisor, she provided transportation, assistance with personal care, social, emotional, and supervision of persons with developmental disabilities and mental illness. Tracie Shier has over 15 years of supervisory experience overseeing adult foster care licensed facilities to ensure all contractual requirements are met, including related regulatory guidelines at the state and local levels. Tracie Shier currently holds CPR1 First Aid certification and contract agency training.

A licensing record clearance request was completed with no LEIN convictions recorded for the Sherri Turner as licensee designee and Tracie Shier as the administrator. Sherri Turner as licensee designee and Tracie Shier as the administrator submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

Sherri Turner as licensee designee and Tracie Shier as the administrator have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

The staffing pattern for the original license of this six-bed facility is adequate and includes a minimum of two staff to one resident per shift. All staff shall be awake during sleeping hours.

Sherri Turner as licensee designee and Tracie Shier as the administrator acknowledges an understanding of the training and qualification requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff two –to- six resident ratio.

Sherri Turner as licensee designee and Tracie Shier as the administrator acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, “direct access” to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website (www.miltcpartnership.org), L-1 Identity Solutions™ (formerly Identix ®), and the related documents required to be maintained in each employees record to demonstrate compliance.

Sherri Turner as licensee designee and Tracie Shier as the administrator acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee, can administer medication to residents. In addition, Sherri Turner as licensee designee and Tracie Shier as the administrator has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Sherri Turner as licensee designee and Tracie Shier as the administrator acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, the applicant acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all of the documents contained within each employee’s file.

Sherri Turner as licensee designee and Tracie Shier as the administrator acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. Sherri Turner as licensee designee and Tracie Shier as the administrator indicated that it is their intent to achieve and maintain compliance with these requirements.

Sherri Turner as licensee designee and Tracie Shier as the administrator acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation

of the cause. Sherri Turner as licensee designee and Tracie Shier as the administrator has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

Sherri Turner as licensee designee and Tracie Shier as the administrator acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

Sherri Turner as licensee designee and Tracie Shier as the administrator acknowledges their responsibility to obtain all of the required forms and signatures that are to be completed prior to, or at the time of each resident's admission to the home as well as the required forms and signatures to be completed for each resident on an annual basis. In addition, the applicant acknowledges their responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all of the documents contained within each resident's file.

Sherri Turner as licensee designee and Tracie Shier as the administrator acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

D. Rule/Statutory Violations

Sherri Turner as licensee designee and Tracie Shier as the administrator was in compliance with the licensing act and applicable administrative rules at the time of licensure.

IV. RECOMMENDATION

I recommend issuance of a temporary license to this AFC adult small group home (capacity 1-6).

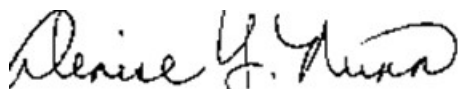


09/27/2024

LaShonda Reed
Licensing Consultant

Date

Approved By:



10/03/2024

Denise Y. Nunn
Area Manager

Date